1 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Apr 17, 2007 8:00 am Secretary of State DOCUMENT # N42105 1. Entity Name 04-17-2007 90057 009 ****61.25 6701 SUNSET BUILDING CONDOMINIUM ASSOCIATION. INC. Principal Place of Business Mailing Address 6701 SUNSET DR 6701 SUNSET DRIVE SUITE 201 MIAMI FL 33143 MIAMI FL 33143 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0256848 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KALBAC, DANIEL G MD Street Address (P.O. Box Number is Not Acceptable) 6701 SUNSET DR SUITE 201 MIAMI FL 33143 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature recuired when re-instating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME KALBAC, DANIEL G MD STREET ADDRESS 6701 SUNSET DR, #201 STREET ADDRESS CITY - ST - 7JP CITY-ST-ZIP **MIAMI FL 33143** IIII F SD ☐ Delete TITLE ☐ Change ■ Addition NAME MOOYOUNG, PAUL NAMI STREET ADDRESS STREET ADDRESS 6701 SUNSET DR, #112 CITY - ST - ZIP CITY-ST-7IP MIAMI FL 33143 ☐ Delete Change ☐ Addition DVP NAME BAUM, GLORIA NAME STREET ADDRESS STREET ADDRESS 6701 SUNSET DRIVE, #209 CHY-ST-7IP CHY-ST-70F MIAMI FL 33143 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME AGHA, MICHAEL STREET ADDRESS STREET ADDRESS 6701 SUNSET DR CITY-ST-ZIP CITY - ST - ZIP MIAMI FL 33143 TITLE ☐ Defete THE Change ☐ Addition ROCA, ALEJANDRO MD NAME NAME STREET ADDRESS 6701 SUNSET DRIVE STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP DILE Delete TITLE ☐ Change ☐ Addition NAME REYES, JOSEPH CPA STREET ADDRESS STREET ADDRESS 6701 SUNSET DR. #100 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33143**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplier ental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with any address, with all other like empowered.

SIGNATURE: